

APR. 12. 2005

4:58PM

TTC-PA 650-326-2422

NO. 485 P.2

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20350 7590 04/11/2005

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Nancy Pizzo

(Depositor's name)

Nancy Pizzo

(Signature)

12 April 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/709,930	09/09/1996	PHILIP S. GREEN	000287-00482	7111

TITLE OF INVENTION: SURGICAL SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	07/11/2005
EXAMINER	ART UNIT		CLASS-SUBCLASS		
GARLAND, STEVEN R	2125		395-086000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Townsend&Townsend&CrewLLP

2 Mark D. Barrish

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SRI INTERNATIONAL

MENLO PARK, CA (US)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

- Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 10

 A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-1430 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature Mark D. Barrish

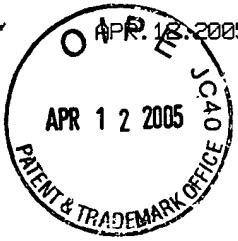
Date 12 April 2005

Typed or printed name Mark D. Barrish

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NO. 485 P. 1

Atty Docket No. 00287S-004820US

PTO FAX NO.: 730-746-4000

ATTENTION: Examiner GARLAND, STEVEN

Group Art Unit 2786

**OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
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CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of PHILIP S. GREEN
Application No. 08/709,930 filed on September 9, 1996 for SURGICAL SYSTEM
are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Number of pages being transmitted, including this page: 2

Dated: 12 April 2005

Nancy Pizzo
Nancy Pizzo

Documents Attached

1. PTOL-85 - Part B - Fee(s) Transmittal

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TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834
Telephone: 650-326-2400
Fax: 650-326-2422

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